

Fill in this information to identify your case and this filing:

Debtor 1 Donna E. Newsome
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS

Case number 17-40121
 (if known)

☐ Check if this is an amended filing

Official Form 106A/B**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☒ No. Go to Part 2.
☐ Yes. Where is the property?

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here..... ➔

\$0.00**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3.1.
 Make: Toyota
 Model: MR2
 Year: 1991
 Approximate mileage: _____
 Other information:
1991 Toyota MR2

Who has an interest in the property?
 Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this is community property
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
<u>\$500.00</u>	<u>\$500.00</u>

3.2.
 Make: BMW
 Model: Z3
 Year: 1997
 Approximate mileage: _____
 Other information:
1997 BMW Z3

Who has an interest in the property?
 Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this is community property
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
<u>\$2,500.00</u>	<u>\$2,500.00</u>

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3.3.		Who has an interest in the property?	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Make:	<u>Toyota</u>	Check one.		
Model:	<u>FJ Cruiser</u>	<input checked="" type="checkbox"/> Debtor 1 only		
Year:	<u>2008</u>	<input type="checkbox"/> Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate mileage:		<input type="checkbox"/> Debtor 1 and Debtor 2 only		
Other information:		<input type="checkbox"/> At least one of the debtors and another	<u>\$20,000.00</u>	<u>\$20,000.00</u>
2008 Toyota FJ Cruiser		<input type="checkbox"/> Check if this is community property (see instructions)		

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here..... →

\$23,000.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. **Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

- ☐ No
☒ Yes. Describe..... **See continuation page(s).**

\$9,246.50

7. **Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- ☒ No
☐ Yes. Describe.....

8. **Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- ☐ No
☒ Yes. Describe..... **Mask-\$75.
Ball artwork-\$10.
Childrens books-\$100.
Paintings-\$1,100.
Family photos-\$0.
Son's art work-\$0.
CD's-\$150.
DVD"s-\$200.
Knickknacks-\$52.
medical books-\$150.**

\$1,837.00

9. **Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- ☐ No
☒ Yes. Describe..... **Bicycle-\$45.
Digital camera-\$50.
Tennis rackets-\$50.**

\$145.00

Debtor 1 **Donna E. Newsome**Case number (if known) **17-40121****10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☒ No☐ Yes. Describe.....**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☒ Yes. Describe..... **clothing****\$1,000.00****12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ No☒ Yes. Describe..... **Costume jewelry-\$400.
Gemstone Jewelry-\$8,500.
2 fur coats-\$1,000.****\$9,900.00****13. Non-farm animals***Examples:* Dogs, cats, birds, horses☐ No☒ Yes. Describe..... **Debtor has 1 dog as a family pet.
(no cash value)****\$0.00****14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Give specific information.....**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....****\$22,128.50****Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the
portion you own?
Do not deduct secured
claims or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition☐ No☒ Yes..... Cash: **\$200.00****17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.☐ No☒ Yes..... Institution name:

17.1. Checking account:	Checking account with Chase Bank (Business) (ending in 0277)	\$46.94
17.2. Checking account:	Checking account with Chase (Personal) (ending in 6438)	\$91.89
17.3. Checking account:	Checking account with Business Banking & Trust Company (Business) (ending in 9993)	\$1,294.79

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17.4.	Checking account:	Checking account with BB&T -Personal (ending in 9750)	\$515.40
17.5.	Savings account:	Savings account with Chase Bank (Business) (ending in 5691)	\$30.00
17.6.	Savings account:	Savings account with Chase Bank (Personal) (ending in 6350)	\$10.00
17.7.	Savings account:	Savings account with Business Banking & Trust (Business) (ending in 1977)	\$7.35
17.8.	Savings account:	Savings account with BB&T -Personal (ending in 8206)	\$96.00

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts☒ No☐ Yes..... Institution or issuer name:**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**☐ No☒ Yes. Give specific
information about
them.....

Name of entity:

% of ownership:

Donna Ellen Newsome, M.D., Ph.D, P.A
(closed)100%\$0.00Donna Ellen Newsome, M.D., Ph.D
(Sole Proprietorship)100%\$0.00**20. Government and corporate bonds and other negotiable and non-negotiable instruments***Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.☒ No☐ Yes. Give specific
information about
them.....

Issuer name:

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans☐ No☒ Yes. List each
account separately.

Type of account:

Institution name:

IRA:

IRA with Morgan Statnley Smith Barney\$3,500.00**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others☐ No☒ Yes.....

Institution name or individual:

Security deposit on rental unit:

Security deposit with First Choice Realtors (total deposit
\$1,500.00; Debtor expects to receive half upon eventual
move out)\$750.00**23. Annuities** (A contract for a specific periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes..... Issuer name and description:

Debtor 1 Donna E. NewsomeCase number (if known) 17-40121**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☐ No☒ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)Texas Tuition Promise fund\$23,000.00**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**☐ No☒ Yes. Give specific Trust for son set up through Debtor's will.
information about them\$0.00**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements☒ No☐ Yes. Give specific
information about them**27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses☐ No☒ Yes. Give specific Medical Doctor, M.D.
information about them Philosophy Doctorate, Ph.D
Board Certified in Neurology\$0.00**Money or property owed to you?****Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.**28. Tax refunds owed to you**☒ No☐ Yes. Give specific information
about them, including whether
you already filed the returns
and the tax years.....

Federal: _____

State: _____

Local: _____

29. Family support*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement☐ No☒ Yes. Give specific information**Support: Ex-spouse owes approximately \$52,000.00 for reimbursement of
their son's medical expenses from 4/2007-Present. (Debtor believes this to
be uncollectible). Amt: \$0.00**Alimony: \$0.00Maintenance: \$0.00Support: \$0.00Divorce settlement: \$0.00Property settlement: \$0.00**30. Other amounts someone owes you***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else☒ No☐ Yes. Give specific information**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☐ No☒ Yes. Name the insurance
company of each policy

and list its value..... Company name:

Beneficiary:

Surrender or refund value:

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Term life insurance policy through
Prudential.
(no cash value)

\$0.00

Medical Malpractice insurance policy
with Texas Medical Liability Trust

\$0.00**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

☒ No☐ Yes. Give specific information _____**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No☐ Yes. Describe each claim..... _____**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim..... _____**35. Any financial assets you did not already list**☒ No☐ Yes. Give specific information _____**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....****\$29,542.37****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?**☐ No. Go to Part 6.☒ Yes. Go to line 38.

Current value of the
portion you own?
Do not deduct secured
claims or exemptions.

38. Accounts receivable or commissions you already earned☐ No☒ Yes. Describe.. **Accounts Receivable****\$177,425.52****39. Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones,
desks, chairs, electronic devices

☐ No

☒ Yes. Describe.. **Desk-\$50.**
Desktop computer and printer-\$800.
Laptop-\$250.
Cell phone-\$50.

\$1,150.00**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**☒ No☐ Yes. Describe.. _____

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41. Inventory

- ☒ No
☐ Yes. Describe.. _____

42. Interests in partnerships or joint ventures

- ☒ No
☐ Yes. Describe..... Name of entity: _____ % of ownership: _____

43. Customer lists, mailing lists, or other compilations

- ☒ No
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?
☐ No
☐ Yes. Describe..... _____

44. Any business-related property you did not already list

- ☒ No
☐ Yes. Give specific information.

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here..... →

\$178,575.52

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Current value of the
portion you own?
Do not deduct secured
claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

- ☒ No
☐ Yes.... _____

48. Crops—either growing or harvested

- ☒ No
☐ Yes. Give specific
information..... _____

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

- ☒ No
☐ Yes.... _____

50. Farm and fishing supplies, chemicals, and feed

- ☒ No
☐ Yes.... _____

51. Any farm- and commercial fishing-related property you did not already list

- ☒ No
☐ Yes. Give specific
information..... _____

Case number (if known) **17-40121**

\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☐ No
- ☒ Yes. Give specific information.

Medical provider number	\$0.00
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54. Add the dollar value of all of your entries from Part 7. Write that number here..... ➡ \$0.00

Part 8: List the Totals of Each Part of this Form

55. **Part 1: Total real estate, line 2**..... ➔ **\$0.00**

56. Part 2: Total vehicles, line 5	\$23,000.00
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57. Part 3: Total personal and household items, line 15 **\$22,128.50**

58. Part 4: Total financial assets, line 36	\$29,542.37
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59. Part 5: Total business-related property, line 45	\$178,575.52
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60. Part 6: Total farm- and fishing-related property, line 52	\$0.00
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61. Part 7: Total other property not listed, line 54	+	\$0.00
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62. Total personal property. Add lines 56 through 61.....	\$253,246.39	Copy personal property total → +	\$253,246.39
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63. Total of all property on Schedule A/B.	Add line 55 + line 62.....	\$253,246.39
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Debtor 1 Donna E. NewsomeCase number (if known) 17-401216. Household goods and furnishings (details):

3 Bedroom sets-	<u>\$2,500.00</u>
refridgerator-	<u>\$600.00</u>
2 TV's	<u>\$500.00</u>
Dining room table & chairs-	<u>\$400.00</u>
4 chairs-	<u>\$160.00</u>
Sofa-\$150.	<u>\$250.00</u>
large chair-\$100.	
Dishes-\$100.	
Glassware-\$100.	
Silverware-\$40.	
Toaster-\$15.	
Blender-\$10.	
Fryer-\$10.	
Pitchers-\$5.	
Plasticware-\$1.	
Placemats-\$.50	
3 ottomans-\$50.	<u>\$50.00</u>
Big wheel	<u>\$50.00</u>
small chair-45.	
artificial flowers-\$40.	<u>\$85.00</u>
2 DVD players-\$40.	
6 lamps-\$35.	
2 DVD/CD holders-\$25.	
2 Trunks-\$25.	
5 comforters-\$25.	
Bench-\$15.	
4 Vases-\$15.	
4 Canisters-\$15.	
Sheets-\$15.	
Toy boxes-\$10.	
4 clocks-\$10.	
Glass boel-\$10.	
Towels-\$10.	
CD player-\$10.	
Pillows-\$5.	
Miscellaneous decor-\$5.	
Piano	<u>\$4,000.00</u>
Hand and garden tools	<u>\$100.00</u>

Fill in this information to identify your case:

Debtor 1 Donna E. Newsome
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS

Case number 17-40121
 (if known)

☐ Check if this is an amended filing

Official Form 106C**Schedule C: The Property You Claim as Exempt**

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption	
Brief description: 1991 Toyota MR2	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u>	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>3.1</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: 1997 BMW Z3	<u>\$2,500.00</u>	<input checked="" type="checkbox"/> <u>\$2,500.00</u>	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>3.2</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: 2008 Toyota FJ Cruiser (1st exemption claimed for this asset) Line from Schedule A/B: <u>3.3</u>	<u>\$20,000.00</u>	<input checked="" type="checkbox"/> <u>\$3,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
Brief description: 2008 Toyota FJ Cruiser (2nd exemption claimed for this asset) Line from Schedule A/B: <u>3.3</u>	<u>\$20,000.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: 3 Bedroom sets- Line from Schedule A/B: <u>6</u>	<u>\$2,500.00</u>	<input checked="" type="checkbox"/> <u>\$2,500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: refridgerator- Line from Schedule A/B: <u>6</u>	<u>\$600.00</u>	<input checked="" type="checkbox"/> <u>\$600.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: 2 TV's Line from Schedule A/B: <u>6</u>	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: Dining room table & chairs- Line from Schedule A/B: <u>6</u>	<u>\$400.00</u>	<input checked="" type="checkbox"/> <u>\$400.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: 4 chairs- Line from Schedule A/B: <u>6</u>	<u>\$160.00</u>	<input checked="" type="checkbox"/> <u>\$160.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: Sofa-\$150. large chair-\$100. Line from Schedule A/B: <u>6</u>	<u>\$250.00</u>	<input checked="" type="checkbox"/> <u>\$250.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: Dishes-\$100. Glassware-\$100. Silverware-\$40. Toaster-\$15. Blender-\$10. Fryer-\$10. Pitchers-\$5. Plasticware-\$1. Placemats-\$50 Line from Schedule A/B: <u>6</u>	<u>\$281.50</u>	<input checked="" type="checkbox"/> <u>\$281.50</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: 3 ottomans-\$50. Line from Schedule A/B: <u>6</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: Big wheel Line from Schedule A/B: <u>6</u>	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: small chair-\$45. artificial flowers-\$40. Line from Schedule A/B: <u>6</u>	<u>\$85.00</u>	<input checked="" type="checkbox"/> <u>\$85.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: 2 DVD players-\$40. 6 lamps-\$35. 2 DVD/CD holders-\$25. 2 Trunks-\$25. 5 comforters-\$25. Bench-\$15. 4 Vases-\$15. 4 Canisters-\$15. Sheets-\$15. Toy boxes-\$10. 4 clocks-\$10. Glass boel-\$10. Towels-\$10. CD player-\$10. Pillows-\$5. Miscellaneous decor-\$5. Line from Schedule A/B: <u>6</u>	<u>\$270.00</u>	<input checked="" type="checkbox"/> <u>\$270.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)

Debtor 1 Donna E. NewsomeCase number (if known) 17-40121**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: Piano (1st exemption claimed for this asset) Line from Schedule A/B: <u>6</u>	<u>\$4,000.00</u>	<input checked="" type="checkbox"/> <u>\$4,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: Piano (2nd exemption claimed for this asset) Line from Schedule A/B: <u>6</u>	<u>\$4,000.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Hand and garden tools Line from Schedule A/B: <u>6</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: Mask-\$75. Ball artwork-\$10. Childrens books-\$100. Paintings-\$1,100. Family photos-\$0. Son's art work-\$0. CD's-\$150. DVD"s-\$200. Knickknacks-\$52. medical books-\$150. Line from Schedule A/B: <u>8</u>	<u>\$1,837.00</u>	<input checked="" type="checkbox"/> <u>\$1,837.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: Bicycle-\$45. Digital camera-\$50. Tennis rackets-\$50. Line from Schedule A/B: <u>9</u>	<u>\$145.00</u>	<input checked="" type="checkbox"/> <u>\$145.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: clothing (1st exemption claimed for this asset) Line from Schedule A/B: <u>11</u>	<u>\$1,000.00</u>	<input checked="" type="checkbox"/> <u>\$1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: clothing (2nd exemption claimed for this asset) Line from Schedule A/B: <u>11</u>	<u>\$1,000.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)

Debtor 1 Donna E. NewsomeCase number (if known) 17-40121**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: Costume jewelry-\$400. Gemstone Jewelry-\$8,500. 2 fur coats-\$1,000. (1st exemption claimed for this asset) Line from Schedule A/B: <u>12</u>	<u>\$9,900.00</u>	<input checked="" type="checkbox"/> <u>\$1,600.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
Brief description: Costume jewelry-\$400. Gemstone Jewelry-\$8,500. 2 fur coats-\$1,000. (2nd exemption claimed for this asset) Line from Schedule A/B: <u>12</u>	<u>\$9,900.00</u>	<input checked="" type="checkbox"/> <u>\$8,300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Debtor has 1 dog as a family pet. (no cash value) Line from Schedule A/B: <u>13</u>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: Cash on Hand Line from Schedule A/B: <u>16</u>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Checking account with Chase Bank (Business) (ending in 0277) Line from Schedule A/B: <u>17.1</u>	<u>\$46.94</u>	<input checked="" type="checkbox"/> <u>\$46.94</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Savings account with Chase Bank (Business) (ending in 5691) Line from Schedule A/B: <u>17.5</u>	<u>\$30.00</u>	<input checked="" type="checkbox"/> <u>\$30.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Checking account with Chase (Personal) (ending in 6438) Line from Schedule A/B: <u>17.2</u>	<u>\$91.89</u>	<input checked="" type="checkbox"/> <u>\$91.89</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Checking account with Business Banking & Trust Company (Business) (ending in 9993) Line from Schedule A/B: <u>17.3</u>	<u>\$1,294.79</u>	<input checked="" type="checkbox"/> <u>\$1,294.79</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)

Debtor 1 Donna E. NewsomeCase number (if known) 17-40121**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: Checking account with BB&T -Personal (ending in 9750) Line from Schedule A/B: <u>17.4</u>	<u>\$515.40</u>	<input checked="" type="checkbox"/> <u>\$136.38</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: IRA with Morgan Statnley Smith Barney Line from Schedule A/B: <u>21</u>	<u>\$3,500.00</u>	<input checked="" type="checkbox"/> <u>\$3,500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(10)(E)
Brief description: Texas Tuition Promise fund Line from Schedule A/B: <u>24</u>	<u>\$23,000.00</u>	<input checked="" type="checkbox"/> <u>\$6,425.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 541(b)(5)
Brief description: Ex-spouse owes approximately \$52,000.00 for reimbursement of their son's medical expenses from 4/2007-Present. (Debtor believes this to be uncollectible) Line from Schedule A/B: <u>29</u>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(10)(D)
Brief description: Term life insurance policy through Prudential. (no cash value) Line from Schedule A/B: <u>31</u>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(7)
Brief description: Medical Malpractice insurance policy with Texas Medical Liability Trust Line from Schedule A/B: <u>31</u>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(7)
Brief description: Desk-\$50. Desktop computer and printer-\$800. Laptop-\$250. Cell phone-\$50. Line from Schedule A/B: <u>39</u>	<u>\$1,150.00</u>	<input checked="" type="checkbox"/> <u>\$1,150.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(6)

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF TEXAS
SHERMAN DIVISION**

IN RE:

Donna E. Newsome

Debtor(s)

§
§
§
§
§

Case No. 17-40121Chapter 11

**DECLARATION FOR ELECTRONIC FILING OF
BANKRUPTCY PETITION AND MASTER MAILING LIST (MATRIX)**

PART I: DECLARATION OF PETITIONER:

As an individual debtor in this case, or as the individual authorized to act on behalf of the corporation, partnership, or limited liability company seeking bankruptcy relief in this case, I hereby request relief as, or on behalf of, the debtor in accordance with the chapter of title 11, United States Code, specified in the petition to be filed electronically in this case. I have read the information provided in the petition and in the lists of creditors to be filed electronically in this case and I HEREBY DECLARE UNDER PENALTY OF PERJURY that the information provided therein, as well as the social security information disclosed in this document, is true and correct. I understand that this Declaration is to be filed with the Bankruptcy Court within five (5) business days after the petition and lists of creditors have been filed electronically. I understand that a failure to file the signed original of this Declaration will result in the dismissal of my case.

☐ *[Only include for Chapter 7 individual petitioners whose debts are primarily consumer debts] --*

I am an individual whose debts are primarily consumer debts and who has chosen to file under chapter 7. I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each chapter, and choose to proceed under chapter 7.

☐ *[Only include if petitioner is a corporation, partnership or limited liability company] --*

I hereby further declare under penalty of perjury that I have been authorized to file the petition and lists of creditors on behalf of the debtor in this case.

Date: _____

Donna E. Newsome

Debtor

Soc. Sec. No. 225-19-0099**PART II: DECLARATION OF ATTORNEY:**

I declare UNDER PENALTY OF PERJURY that: (1) I will give the debtor(s) a copy of all documents referenced by Part I herein which are filed with the United States Bankruptcy Court; and (2) I have informed the debtor(s), if an individual with primarily consumer debts, that he or she may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.

Date: _____

Robert T. DeMarco, Attorney for Debtor

Fill in this information to identify your case:

Debtor 1	<u>Donna</u>	<u>E.</u>	<u>Newsome</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF TEXAS</u>			
Case number (if known)	<u>17-40121</u>		

☐ Check if this is an amended filing
Official Form 106D**Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A
Amount of claim
Do not deduct the value of collateral

Column B
Value of collateral that supports this claim

Column C
Unsecured portion if any

2.1

Capatial One Auto Finance
Creditor's name
P.O. Box 60511
Number Street

Describe the property that secures the claim:

2008 Toyota FJ Cruiser

\$17,000.00

\$20,000.00

CITY OF INDUSTRCA 91716
City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who owes the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset)
Car Loan

Date debt was incurred 2013 Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here:

\$17,000.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$17,000.00

Fill in this information to identify your case:

Debtor 1	<u>Donna</u>	<u>E.</u>	<u>Newsome</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>EASTERN DISTRICT OF TEXAS</u>		
Case number (if known)	<u>17-40121</u>		

☐ Check if this is an amended filing
Official Form 106E/F**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**

- ☐ No. Go to Part 2.
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1	\$119,906.00	\$119,906.00	\$0.00

Internal Revenue Service

Priority Creditor's Name

Centralized Insolvency Operations

Number Street

PO Box 7346

Last 4 digits of account number

When was the debt incurred? **2013-2014****Philadelphia PA 19101-7346**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify

Debtor 1 Donna E. NewsomeCase number (if known) 17-40121**Part 1: Your PRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**Priority
amount****Nonpriority
amount****2.2**\$65,000.00\$65,000.00\$0.00**Internal Revenue Service**

Priority Creditor's Name

Last 4 digits of account number _____

Centralized Insolvency OperationsWhen was the debt incurred? 2016

Number Street

PO Box 7346

As of the date you file, the claim is: Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Philadelphia**PA****19101-7346**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of Tx is estimated.

Debtor 1 Donna E. Newsome

Case number (if known) 17-40121

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

Total claim

\$30,211.74

4.1

Christopher Moser

Nonpriority Creditor's Name

Quilling, Selander et al

Number Street

Moser

2001 Bryan St., Ste.1800

Dallas TX 75201

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Attorney Fees

4.2

Internal Revenue Service

Nonpriority Creditor's Name

Centralized Insolvency Operations

Number Street

PO Box 7346

Philadelphia PA 19101-7346

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? 2007-2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
1040 Taxes

\$228,874.00

Debtor 1 Donna E. NewsomeCase number (if known) 17-40121**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.3****\$18,818.69****Michell Chow**

Nonpriority Creditor's Name

Chapter 7 Trustee

Number Street

4115 N. Central Exprwy.**Dallas TX 75204**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Debt

4.4**\$85,172.69****Nelnet US Dept. of Education**

Nonpriority Creditor's Name

PO Box 740283

Number Street

Atlanta GA 30374-0283

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

4.5**\$354,166.34****North Texas Neuroscience Center, P.A.**

Nonpriority Creditor's Name

440 W. I-365, Suite 225

Number Street

Irving TX 75063

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Business debt

Debtor 1 Donna E. NewsomeCase number (if known) 17-40121**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.6****\$3,534.20****US Department of Health & Human Services**

Nonpriority Creditor's Name

PO Box 530231

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Atlanta GA 30353-0231

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

4.7**\$6,502.60****US Department of Health & Human Services**

Nonpriority Creditor's Name

PO Box 530231

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Atlanta GA 30353-0231

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

Debtor 1 Donna E. Newsome Case number (if known) 17-40121

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Kelly B. Williamson On which entry in Part 1 or Part 2 did you list the original creditor?
Name
18909 Lloyd Circel, Ste. 514 Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street ☒ Part 2: Creditors with Nonpriority Unsecured Claims

Dallas TX 75252 Last 4 digits of account number _____
City State ZIP Code

North Texas Neuroscience Center, P.A. On which entry in Part 1 or Part 2 did you list the original creditor?
Name
405 Highway 121 Bypass Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street ☒ Part 2: Creditors with Nonpriority Unsecured Claims
Building A, Suite 150

Lewisville TX 75067 Last 4 digits of account number _____
City State ZIP Code

Debtor 1 Donna E. Newsome

Case number (if known) 17-40121

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$184,906.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6d. <u>\$184,906.00</u>

		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$95,209.49</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$632,070.77</u>
	6j. Total. Add lines 6f through 6i.	6j. <u>\$727,280.26</u>

Fill in this information to identify your case:

Debtor 1	<u>Donna</u>	<u>E.</u>	<u>Newsome</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>EASTERN DISTRICT OF TEXAS</u>		
Case number (if known)	<u>17-40121</u>		

☐ Check if this is an amended filing
Official Form 106G**Schedule G: Executory Contracts and Unexpired Leases****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

2.1 First Choice Realtors

Name

Residential Lease

Contract to be ASSUMED

Number Street

City

State

ZIP Code

Fill in this information to identify your case:

Debtor 1	<u>Donna</u>	<u>E.</u>	<u>Newsome</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF TEXAS</u>			
Case number (if known)	<u>17-40121</u>		

☐ Check if this is an amended filing
Official Form 106H**Schedule H: Your Codebtors****12/15**

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

- Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)
 - ☐ No
 - ☒ Yes
- Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
 - ☐ No. Go to line 3.
 - ☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
 - ☒ No
 - ☐ Yes
- In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D*, *Schedule E/F*, or *Schedule G* to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1	<u>Donna Ellen Newsome, M.D., Ph.D, P.A.</u>		
	Name		
	<u>900 N. Walnut Creek Drive</u>		
	Number	Street	
	<u>#211 Suite 100</u>		
	<u>Mansfield</u>	<u>TX</u>	<u>76063</u>
	City	State	ZIP Code

- ☐ Schedule D, line _____
- ☒ Schedule E/F, line 4.5
- ☐ Schedule G, line _____

North Texas Neuroscience Center, P.A.

Fill in this information to identify your case:

Debtor 1	<u>Donna</u>	<u>E.</u>	<u>Newsome</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>EASTERN DISTRICT OF TEXAS</u>		
Case number (if known)	<u>17-40121</u>		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I**Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status**Debtor 1**

- ☒ Employed
☐ Not employed

OccupationNeurologist**Employer's name**Donna Ellen Newsome, M.D., Ph.D**Employer's address**900 N. Walnut Creek Drive

Number Street

#211 Suite 100**Debtor 2 or non-filing spouse**

- ☐ Employed
☐ Not employed

Number Street

Mansfield

City

TX

State

76063

Zip Code

City

State

Zip Code

How long employed there? 9 years**Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. <u>\$0.00</u>	
3. Estimate and list monthly overtime pay.	3. + <u>\$0.00</u>	
4. Calculate gross income. Add line 2 + line 3.	4. <u>\$0.00</u>	

Debtor 1 Donna E. NewsomeCase number (if known) 17-40121

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here → 4.	<u>\$0.00</u>	
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. <u>\$0.00</u>	
5b. Mandatory contributions for retirement plans	5b. <u>\$0.00</u>	
5c. Voluntary contributions for retirement plans	5c. <u>\$0.00</u>	
5d. Required repayments of retirement fund loans	5d. <u>\$0.00</u>	
5e. Insurance	5e. <u>\$0.00</u>	
5f. Domestic support obligations	5f. <u>\$0.00</u>	
5g. Union dues	5g. <u>\$0.00</u>	
5h. Other deductions. Specify: _____	5h. + <u>\$0.00</u>	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. <u>\$0.00</u>	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. <u>\$0.00</u>	
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. <u>\$18,024.31</u>	
8b. Interest and dividends	8b. <u>\$0.00</u>	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. <u>\$0.00</u>	
8d. Unemployment compensation	8d. <u>\$0.00</u>	
8e. Social Security	8e. <u>\$0.00</u>	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. <u>\$0.00</u>	
8g. Pension or retirement income	8g. <u>\$0.00</u>	
8h. Other monthly income. Specify: _____	8h. + <u>\$0.00</u>	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. <u>\$18,024.31</u>	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. <u>\$18,024.31</u>	+ <u> </u> = <u>\$18,024.31</u>
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____		11. + <u>\$0.00</u>
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.		12. <u>\$18,024.31</u> Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____	None.	

Debtor 1 Donna E. NewsomeCase number (if known) 17-40121

8a. Attached Statement (Debtor 1)

Donna Newsome M.D, Ph.D**Gross Monthly Income:** \$33,600.00

<u>Expense</u>	<u>Category</u>	<u>Amount</u>
Bank charges		\$76.00
Medical Consulting(Burks Medical Consulting)		\$5,000.00
Fax service		\$12.95
Medical Liability insurance		\$1,200.00
Offices supplies		\$28.77
Gas		\$304.95
Legal Expenses		\$220.00
Accounting expenses		\$200.00
phone		\$650.00
software		\$249.00
Disability Insurance		\$750.21
Computer expenes		\$84.34
Medical Association dues		\$134.33
Genesis medical billing		\$165.00
Tolls		\$80.00
Postage		\$2.64
parking		\$5.50
Licensing		\$162.00
Continuing education		\$250.00
Estimated taxes		\$6,000.00
Total Monthly Expenses		<u>\$15,575.69</u>
Net Monthly Income:		<u><u>\$18,024.31</u></u>

Fill in this information to identify your case:

Debtor 1 Donna E. Newsome
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS

Case number 17-40121
 (if known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J**Schedule J: Your Expenses****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household**1. Is this a joint case?**

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☐ No☒ Yes. Fill out this information for each dependent.....**Dependent's relationship to Debtor 1 or Debtor 2****Dependent's age****Does dependent live with you?**

	<u>12 years</u>	<input type="checkbox"/> No
		<input checked="" type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses**4. The rental or home ownership expenses for your residence.**
Include first mortgage payments and any rent for the ground or lot.4. \$1,600.00

If not included in line 4:

4a. Real estate taxes

4a. _____

4b. Property, homeowner's, or renter's insurance

4b. \$92.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$112.00

4d. Homeowner's association or condominium dues

4d. _____

Debtor 1 Donna E. NewsomeCase number (if known) 17-40121Your expenses

5. Additional mortgage payments for your residence, such as home equity loans	5.	_____
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	<u>\$400.00</u>
6b. Water, sewer, garbage collection	6b.	<u>\$250.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	<u>\$300.00</u>
6d. Other. Specify: _____	6d.	_____
7. Food and housekeeping supplies	7.	<u>\$1,000.00</u>
8. Childcare and children's education costs (See continuation sheet(s) for details)	8.	<u>\$2,950.00</u>
9. Clothing, laundry, and dry cleaning (See continuation sheet(s) for details)	9.	<u>\$1,150.00</u>
10. Personal care products and services	10.	<u>\$800.00</u>
11. Medical and dental expenses	11.	<u>\$1,219.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	<u>\$175.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	<u>\$50.00</u>
14. Charitable contributions and religious donations	14.	<u>\$200.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	<u>\$360.00</u>
15b. Health insurance	15b.	<u>\$1,529.00</u>
15c. Vehicle insurance	15c.	<u>\$250.00</u>
15d. Other insurance. Specify: <u>Dental</u>	15d.	<u>\$440.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	_____
17. Installment or lease payments:		
17a. Car payments for Vehicle 1 <u>FJ Cruiser</u>	17a.	<u>\$500.00</u>
17b. Car payments for Vehicle 2	17b.	_____
17c. Other. Specify: <u>Maint, oil changes, tags, inspections</u>	17c.	<u>\$410.00</u>
17d. Other. Specify: <u>Son's college fund / Pet food/Vet expenses</u>	17d.	<u>\$427.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	_____
19. Other payments you make to support others who do not live with you. Specify: _____	19.	_____

Debtor 1 Donna E. NewsomeCase number (if known) 17-40121**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

20a. Mortgages on other property	20a.	_____
20b. Real estate taxes	20b.	_____
20c. Property, homeowner's, or renter's insurance	20c.	_____
20d. Maintenance, repair, and upkeep expenses	20d.	_____
20e. Homeowner's association or condominium dues	20e.	_____

21. Other. Specify: <u>See continuation sheet</u>	21.	+	<u>\$185.00</u>
--	-----	---	-----------------

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.	22a.	<u>\$14,399.00</u>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.	_____
22c. Add line 22a and 22b. The result is your monthly expenses.	22c.	<u>\$14,399.00</u>

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	<u>\$18,024.31</u>
23b. Copy your monthly expenses from line 22c above.	23b.	- <u>\$14,399.00</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	<u>\$3,625.31</u>

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.☐ Yes.

Explain here:

None.

Debtor 1 Donna E. NewsomeCase number (if known) 17-401218. Childcare and children's education costs (details):

Nanny's salary	\$2,750.00
School expenses	\$200.00

Total:	<u>\$2,950.00</u>
--------	-------------------

9. Clothing, laundry, and dry cleaning (details):

Clothing	\$800.00
Dry cleaning	\$350.00

Total:	<u>\$1,150.00</u>
--------	-------------------

21. Other. Specify:

Security	\$35.00
Gym membership	\$150.00

Total:	<u>\$185.00</u>
--------	-----------------

Fill in this information to identify your case:

Debtor 1	<u>Donna</u>	<u>E.</u>	<u>Newsome</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF TEXAS</u>			
Case number (if known)	<u>17-40121</u>		

☐ Check if this is an amended filing
Official Form 106Sum**Summary of Your Assets and Liabilities and Certain Statistical Information****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets
Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B..... \$0.00

1b. Copy line 62, Total personal property, from Schedule A/B..... \$233,846.39

1c. Copy line 63, Total of all property on Schedule A/B..... \$233,846.39

Part 2: Summarize Your Liabilities

Your liabilities
Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... \$17,000.00

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... \$184,906.00

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... + \$727,280.26

Your total liabilities**\$929,186.26****Part 3: Summarize Your Income and Expenses**4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I..... \$18,024.31

5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J..... \$14,399.00

Debtor 1 Donna E. Newsome

Case number (if known) 17-40121

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
☒ Yes

7. What kind of debt do you have?

- ☐ Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
☒ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:

Total claim

From Part 4 on *Schedule E/F*, copy the following:

9a. Domestic support obligations. (Copy line 6a.)

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9d. Student loans. (Copy line 6f.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

+ _____

9g. **Total.** Add lines 9a through 9f.

Fill in this information to identify your case:

Debtor 1	<u>Donna</u>	<u>E.</u>	<u>Newsome</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____ First Name	_____ Middle Name	_____ Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF TEXAS</u>			
Case number (if known)	<u>17-40121</u>		

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

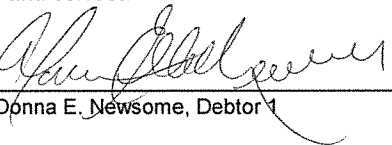
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X


Donna E. Newsome, Debtor 1

Date 02/02/2017
MM / DD / YYYY

X

Signature of Debtor 2

Date _____
MM / DD / YYYY